

Missouri Department of Elementary and Secondary Education

Division of Special Education

**Report on First Steps Children Identified through the  
Newborn Hearing Screening**

September 2003

Under the Newborn Hearing Screening law, Section 191.931 RSMo, the Missouri Division of Elementary and Secondary Education shall “monitor the delivery of early intervention services to those infants identified by the newborn hearing screening program and report annually to the department of health.”

This report will be divided into four sections, structured as follows:

1. Number of children enrolled in the First Steps program who were named to the aforementioned newborn hearing screening list
2. Early intervention services given to these children under their Individualized Family Services Plan (IFSP)
3. Type of amplification or other assistive technologies each child is receiving under their IFSP to address their hearing loss
4. Status of outcomes identified by their IFSP in relation to their hearing loss and speech

Personally identifiable information is left out of this report, as inclusion of such without parental consent would violate protections of the Family Educational Rights and Privacy Act (FERPA), incorporated by reference in the Individuals with Disabilities Education Act (IDEA).

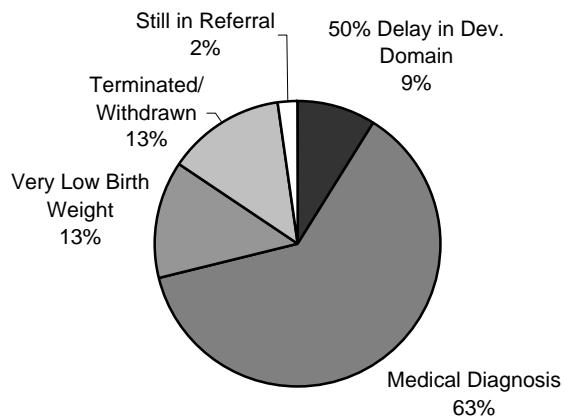
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From the Department of Health and Senior Services’ (DHSS) list of 145 children born in the 2002 calendar year and identified through the Newborn Hearing Screening (NHS), there were 45 children in the System Points of Entry (SPOE) database for the First Steps program as of July 2003. Of those 45 children, ten were listed as active but receiving no assistive technologies or services regarding hearing and/or speech; nine children did not have outcomes

regarding hearing;  
also, nine others  
were not receiving  
any services due  
to termination,  
ineligibility, or  
death.

Grouped by how  
the children were  
determined  
eligible for First  
Steps, 28 of the 45  
children (or 63%)  
were eligible  
through ‘Medical  
Diagnosis.’ Six  
(13%) were

### Program Eligibility



determined to have ‘Very Low Birth Weight,’ while four (9%) were determined to have a ‘50% Delay in One Developmental Domain.’

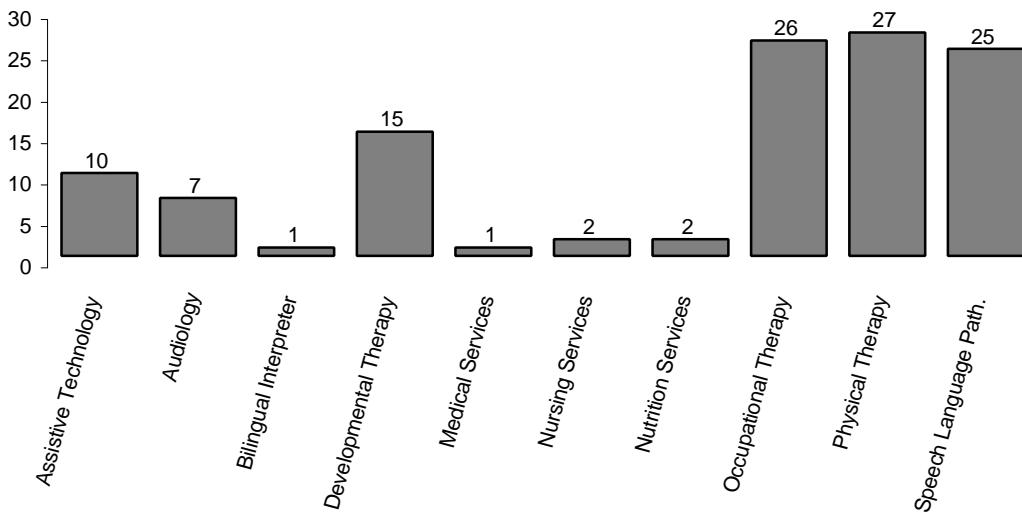
There were seven children without a program eligibility category; six of these seven children never received any services, as they were either deemed ineligible or had their names withdrawn for service consideration. One is still in the referral stage.

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The major types of services provided for the 45 children as of July 7, 2003, are highlighted as follows. A more complete list of services is included in the chart below.

- Physical Therapy – 27 children
- Occupational Therapy – 26 children
- Speech Language Pathology – 25 children
- Developmental Therapy – 15 children
- Assistive Technology – 10 children (4 audio-related, 6 non-audio-related)
- Audiology – 7 children

#### **Services Received for the 45 First Steps Children as of July 7, 2003**



Being that audiology and speech language pathology most directly affect efforts to improve hearing and cognition, a closer look will be taken at the children receiving these two services. All seven of the children receiving audiology services had an eligibility of “Medical Diagnosis”. This was to be expected, as any sort of specified or unspecified hearing loss fall under that category. Speech Language Pathology is a more flexible service (i.e. not just hearing-related), therefore the 25 children receiving that service had more varied eligibilities. Twenty-one of the 25 fell under “Medical Diagnosis,” but there

were also three related to “50% Delay in One Developmental Domain” and one in “Very Low Birth Weight.”

As stated previously, there were seven children that received audiology services of some kind. Four of them received authorized services amounting to Evaluation/Assessment at a Special Purpose Center (two received this service twice); the other three received Direct Child Service at a Special Purpose Center. Two of the children received a progression of authorized services.

- Child #1: Evaluation/Assessment at Special Purpose Center (twice) → Evaluation/Assessment at Home → Direct Child Service at Special Purpose Center → Family Education/Training/Support at Special Purpose Center
- Child #2: Direct Child Service at Special Purpose Center → Family Education/Training/Support at Special Purpose Center

The Speech Language Pathology services were much more varied in their uses. There were 23 children on the list receiving Speech Language Pathology services in the most recent version of the SPOE database.

Of these 23 children, four had received Direct Child Service at home—one received authorization for such services twice, one received authorization three times. Eight had received a combination of in-home Direct Child Service and in-home Evaluation/Assessment. Two had received a combination of in-home Direct Child Service and in-home Consultation/Facilitation with Others; one other a combination of in-home Direct Child Service and in-home Family Education/Training/Support.

One child received Direct Child Service at a special purpose center in their community; two others had Evaluation/Assessment at a special purpose center. One child received a combination of Direct Child Service and Evaluation/Assessment in a community setting.

Four children received authorized services in numerous settings.

- Child #1: Consultation/Facilitation with Others in-home → Direct Child Service in-home → Family Education/Training/Support at special purpose center → Direct Child Service in-home
- Child #2: Direct Child Service in-home → Direct Child Service at special purpose center → Evaluation/Assessment at special purpose center → Direct Child Service at special purpose center → Direct Child Service in-home
- Child #3: Direct Child Service at special purpose center → Direct Child Service in-home → Direct Child Service at special purpose center → Direct Child Service in-home → Group session (location n/a) → Direct Child Service at community setting

- Child #4: Evaluation/Assessment at special purpose center (twice) → Direct Child Service in-home

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Four children among the group of 45 have received amplification and assistive technology through their IFSP, while five others have received assistance from outside the First Steps program.

Children with Assistive Technology authorized through their IFSP:

- Child #1: Widex Senso C8 (bilateral) aid
- Child #2: Widex Senso P38 (bilateral) aid
- Child #3: Phonak Supero 412 (bilateral) aid – might get cochlear implant in the future
- Child #4: Unitron Unison; Digital BTE Hearing Aids (bilateral), eyeglasses

Children with Assistive Technology purchased by a source outside of First Steps

- Child #1: loaner hearing aids (type not available) supplied by local provider
- Child #2: BAHA Classic Softband Bone Conduction Hearing Aid supplied by local provider
- Child #3: bilateral hearing aids (type not available, payer unknown)
- Child #4: digital hearing aids (type not available, payer unknown)
- Child #5: hearing aids (type not available, payer unknown)

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The status of the outcome(s) for the children is reported using one of the following options:

1. Situation changed; outcome not needed
2. Situation unchanged; outcome still needed
3. Outcome partially attained
4. Outcome accomplished

The results by those standards follow: of the 45 children listed, 23 had six-month or annual IFSP reviews containing the status of outcomes. Some children had more than one outcome regarding hearing loss and speech; consequently, there were 29 total outcome ratings for those 23 children. Of those 29 outcomes, thirteen (45%) were rated as “Situation unchanged, outcome still needed,” nine (31%) were rated as “Outcome partially attained,” and the remaining outcomes were either not needed (21%) or accomplished (3%). It should be noted that outcomes on IFSPs do not specify a targeted timeline for achievement. Therefore all outcomes should not be expected to be obtained in a six- or twelve-month time frame.